

**Consulate of the United States of America  
Fukuoka, Japan**



June 22, 2023

Dear Prospective Offerors:

SUBJECT: Request for Quotations (RFQ) Number 19JA25-23-Q-0002  
U.S. Consulate Fukuoka Construction of Restoration of Office  
Space.

U.S. Consulate Fukuoka seeks to enter into a contract with a qualified, responsible, and reliable firm with sufficient knowledge and facilities for Restoration of Office Space for the U.S. Consulate in Fukuoka.

Note: As required by U.S. Government's federal acquisition regulation (FAR), prospective offeror shall be registered in the System for Award Management (SAM) database prior to award of a contract. The website link providing additional vendor registration information is: <https://www.sam.gov/>.

If you are interested in submitting a quote on this project, follow the instructions in "SECTION J - QUOTATION INFORMATION", complete the required portions of the enclosed document, and submit to the email address shown on the next page.

1. Pre-quotation Conference and Site Visit

a. To provide all the quoters with a uniform explanation of requirements, the Embassy will hold a pre-quotation conference and site visit, as follows:

Date and Time: **9:30 a.m., Friday, July 21, 2023 (JST)**

Check-in time will start at 9:10 a.m.

Location: American Consulate Fukuoka

Ohori 2-5-26, Chuo-ku,

Fukuoka city, Fukuoka, 810-0052, Japan

Note: The U.S. Consulate does not provide parking spaces at the Consulate. All participants must arrange their own parking place.

b. All interested quoters who wish to attend must submit individual name (s), company name/address, telephone/fax numbers, and email address to Timothy STAFFORD via email at [STAFFORDTM@STATE.GOV](mailto:STAFFORDTM@STATE.GOV) by no later than 12:00 noon, Tuesday, July 18, 2023 (JST), to arrange entry to the Consulate building.

c. Attendee(s) must present an identification (ID) card (e.g. driver's license, passport, etc.) with photo on it when entering the buildings.

d. Please note that attendees are not allowed to bring PCs, electronic measuring equipment, cameras, and any other kinds of electronic device for this meeting. Therefore, do NOT bring them with you as the Consulate guards will not keep them for you.

e. Photography is NOT ALLOWED within the Consulate building, Residential areas, and grounds. The Consulate will provide approved photos via website if requested.

## 2. Questions

Following the site visit, quoters may submit questions in English in regard to this RFQ by **12:00 noon, Wednesday, July 26, 2023 (JST)**, via e-mail at [STAFFORDTM@STATE.GOV](mailto:STAFFORDTM@STATE.GOV). All questions will be consolidated and one response will be prepared and posted on the Embassy's website, the same website from where you obtained the solicitation documents.

## 3. Quotations

Quotations must be received by no later than **12:00 noon, Friday, August 4, 2023 (JST)** to Timothy Stafford via email as indicated below. No quotation will be accepted after this time.

NOTE: After submission of quotation, quoter shall contact Timothy Stafford by phone or separate email to confirm the receipt of quotation.

Point of Contact: Timothy STAFFORD  
Email: [STAFFORDTM@STATE.GOV](mailto:STAFFORDTM@STATE.GOV)  
Subject: RFQ 19JA25-23-Q-0002

Office: 092-751-8540  
Embassy Telephone Operator: 03-3224-5000

It is understood that no payment will be made for preparation and submission of your quotation.

Thank you in advance for your interest and your time in participating in the Request for Quotations process.

Sincerely,

Shankar D. Rao  
Contracting Officer

Enclosure:  
Request for Quotations 19JA25-23-Q-0002

## STATEMENT OF WORK

### 1. GENERAL

1.1 All work required under this contract shall be accomplished in accordance with Japan Architectural Specification Standard (JASS), the building electrical codes of Japan and the specification standard of Society of Heating, Air-conditioning and Sanitary Engineering of Japan (SHASE). All work required under this contract shall be performed in a professional manner of the respective trade. The Contracting Officer's Representative (COR) and/or COR's designee shall perform QA/QC inspection on contracted work at-any-time basis. Any found deficiencies and/or discrepancies against contract work requirement and specifications shall be corrected accordingly by the Contractor at no additional cost to the Consulate.

1.2 All materials and labor shall be furnished by the Contractor unless otherwise stipulated herein. Quality of all materials to be used for all required work shall meet or exceed Japan Industrial Standard (JIS).

1.3 The Contractor shall be responsible for keeping the work areas clean and neat. After completion of work, clean the work areas in vacuum-clean conditions. The Contractor shall dispose of all debris left over from the contracted work, unless otherwise stipulated herein, outside the Consulate Compound in accordance with applicable local codes for industrial waste disposal.

1.4 Prior to work commencement on the job site, the Contractor shall submit to the COR for approval shop drawings, material samples, color samples, and the work schedule as requested. The work shall be performed on weekdays, unless approved to work on weekends and holidays by the COR. The carpet replacement work and office construction work are allowed to be divided into multiple weeks ends (multiple phase) upon approval by the COR.

1.5 Work hours: Work must be performed between 9:00 to 17:00 on weekdays, weekends, and holidays.

1.6 The Contractor shall guarantee all the work completed under this contract against any defects resulting from the Contractor's performance for the period of one (1) year from the date of acceptance of the completion by the COR. During the warranty period of one (1) year, any found defects attributed to the Vendor's work performance shall be corrected by the Vendor accordingly at no additional cost to the Government.

1.7 The COR and/or COR's designee(s) shall perform QA/QC inspections on the work either in progress or completed state at times as required for quality work performance of the Vendor. Any found deficiencies and/or discrepancies against the specifications of this agreement shall be corrected by the Vendor at no additional cost to the Government.

2. DESCRIPTION OF WORK – Divide Office into two separate offices.

2.1 Moving Work: Disassemble and remove modular furniture currently in Office as needed for wall construction. Discuss with COR for temporary storage location.

2.2 Partial Removal and Restoring of Wall : Partially remove existing wall to create openings for new door and dutch door as per 2.3 and 2.4. Restore any gaps created between the wall and the new openings.

2.3 Relocation of Dutch Door: Remove existing Dutch door and frame to relocate to indicated location. The center of the door must be placed 600mm away from newly established wall as per 2.5. Please refer to drawing (attachment #2).

2.4 New door: Install new W850XH2100mm solid lumber core door to the Facility Office (FAC) indicated in the provided drawing. The center of the door must be placed 600mm away from the existing wall between Office #1 and #2 as per drawing (attachment #2).

Contractor (KTR) shall match the door finish with the Dutch door. KTR must submit sample of the door finish and receive approval from COR prior to start of work. .

2.5 Construct New Wall:

2.5.1 Construct a new wall with 65mm wide metal studs. The studs must be isolated in alternate positions from floor to ceiling to improve sound protection.

2.5.2 The wall must be insulated with glass wool to improve sound protection.

2.5.3 Install two layers of drywalls on each side. The two layers shall consist of one 9.5mm and one 15mm thick drywalls. The wall shall meet the minimum requirements as displayed in the sample below. The drywall seams shall be concealed with approved joint tape and putty. The wall shall have a flush surface prior to receiving finish painting. No surface deflections, set-back or discontinuation shall be accepted.

Example of the section of wall: Yoshino Sekkou Hyperwall 15Z-WI

【ハイパーウォール15Z-W】

|           |                             |
|-----------|-----------------------------|
| 遮音性能(TLD) | TLD-53                      |
| 遮音構造認定番号  | SOI-0112                    |
| 耐火構造認定番号  | FP060NP-0355 (1時間耐火:非耐力)    |
| おすすめ使用場所  | 寮やホテルなどの室間の間仕切で、表面の硬さが必要な場所 |
| 水平断面図     |                             |

- 2.6 Furnish and install baseboard to match existing.
- 2.7 Paint the walls, ceilings and door frame using a gloss water base paint in all constructed areas.
- 2.8 Lighting: The KTR shall remove existing lighting and install a LED lighting fixture (10,000 lm and 5000 k) with a dimmer control in each room. The lighting fixture must meet the minimum requirements as displayed below. Any alternative fixture must be approved by COR.
- Example of model: XLX400DEN (Panasonic)

照明器具検索

**XLX400DEN RZ2**  
(PiPit (ピピット) 調光タイプ・一般タイプ・10000 lmタイプ・昼白色)

起動方式違いの商品を見る

天井直付型 40形 一体型LEDベースライト 連続調光型・調光タイプ (ライコン別売) Dスタイル/富士型 Hf蛍光灯32形高出力型3灯器具相当/Hf蛍光灯63形定格出力型2灯器具相当 Hf32形高出力型/Hf63形定格出力型

パリュアブル商品 (省エネ・デザイン性・配光制御など様々なご要望にお応えできる商品群です。)

◆工場在庫品

◆希望小売価格 48,500 円 (税抜)

【器具本体】 NNLK42523 3,000 円(税抜)

【ライトバー】 NNL4000EN RZ2 45,500 円(税抜)

戻る

**XLX400DEN LR2**  
(一般タイプ・10000 lmタイプ・昼白色・調光)

起動方式違いの商品を見る

天井直付型 40形 一体型LEDベースライト 連続調光型・調光タイプ (ライコン別売) Dスタイル/富士型 Hf蛍光灯32形高出力型3灯器具相当/Hf蛍光灯63形定格出力型2灯器具相当 Hf32形高出力型/Hf63形定格出力型

先端SSL商品※ (長寿命・省電力のLEDを主照明にした、高品質、快適性、先進性を備えた商品群です。) ※LEDを中心とする次世代半導体照明

◆工場在庫品

◆希望小売価格 47,000 円 (税抜)

【器具本体】 NNLK42523 3,000 円(税抜)

【ライトバー】 NNL4000EN LR2 44,000 円(税抜)

器具本体 商品詳細ページ ライトバー 商品詳細ページ

- 2.9 Electrical Work: KTR shall install new electrical circuits for the FAC room.
- 2.9.1 Pull new dedicated 100V circuit from the distribution panel to the FAC office. Install two sets of new duplex power outlets on new wall and one
- 3 of 4

set of new duplex power outlet on the door side wall. Conduits and cables must be concealed.

2.9.2 Pull new dedicated 100V circuit from the distribution panel to the Cashier office. Install two sets of new duplex power outlets on the new wall and one set of new duplex power outlet on the door side wall. Conduits and cables must be concealed.

2.9.3 Install a 120V outlet for the new FAC office with Panasonic WF2315BK outlet by using an existing line. Any alternative method must be COR approved.

2.9.4 Reposition the currently installed smoke detector on the ceiling to the center of the new Cashier office.

2.9.5 Install and wire one set of smoke detector to the center of the FAC office ceiling to the main panel.

2.9.6 KTR shall split the current wiring for the lighting and install two light switches: one for each office. Install one set of light switches at the side of new door and reconfigure the lighting wires. Conceal the wire in the wall if possible. Any alternative method must have COR approval.

2.9.7 Install three new CAT6 lines for the FAC office.

2.9.7.1 KTR shall cable from 1<sup>st</sup> Floor Consulate Server room patch panel.

2.9.7.1.1 Install one orange CAT6 line and terminate both ends using T568B method.

2.9.7.1.2 Install one green CAT6 line and terminate both ends using T568B method.

2.9.7.2 KTR shall cable from Consulate PBX room patch panel.

2.9.7.2.1 Install one blue CAT6 line and terminate both ends using T568B method.

2.10 A/C unit: KTR shall furnish and install one 100V A/C unit for new FAC office.

2.10.1 Minimum capacity requires 3.6kW for cooling and 4.0kW for heating.

2.10.2 Interior unit shall be wall mount type.

2.10.3 Pipes and wiring shall have a covering for both interior and exterior.

2.10.4 The outdoor unit shall be placed out of site from the main road.

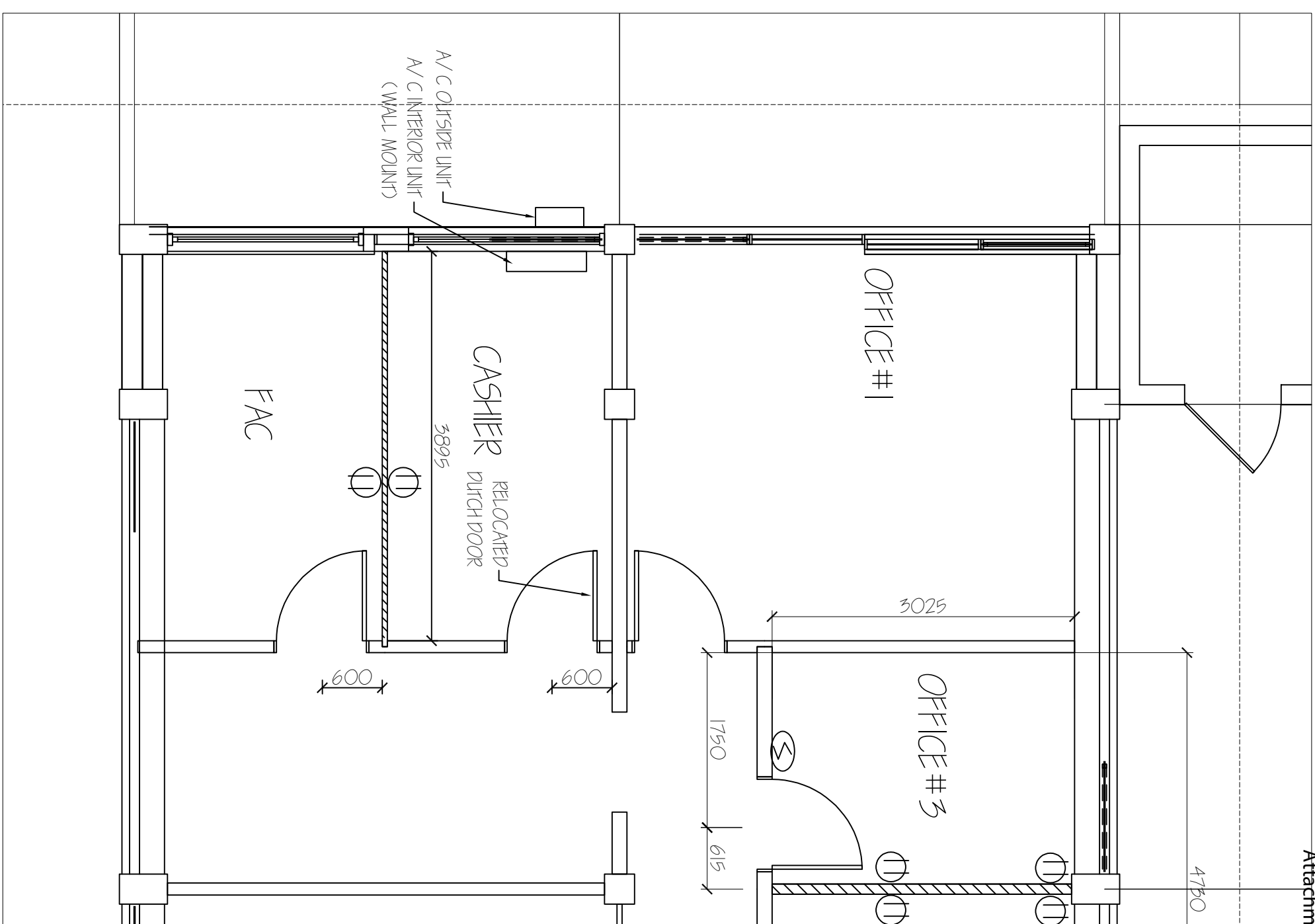
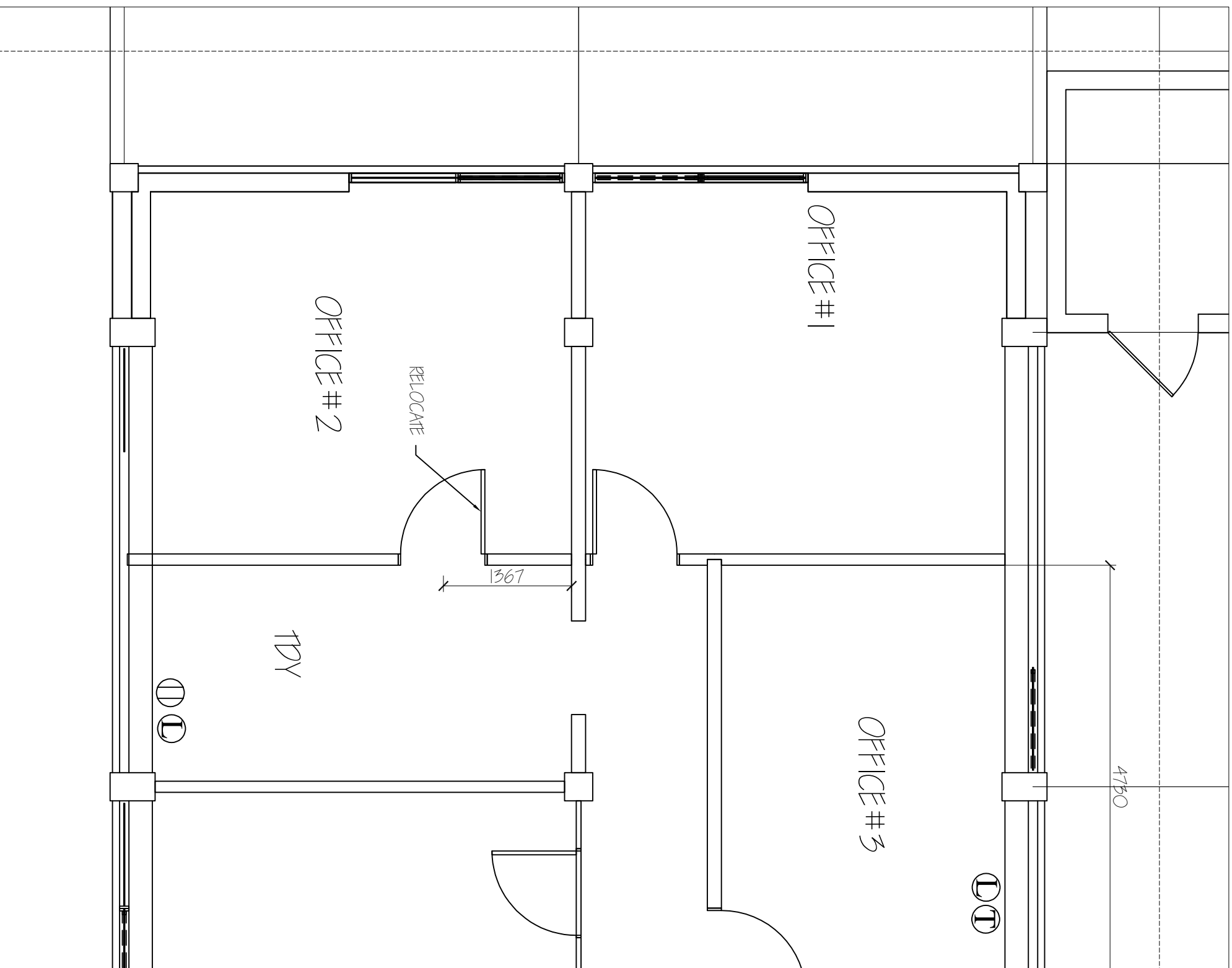
2.10.5 A dedicated power supply shall be established from the distribution panel.

2.11 Furniture: KTR shall furnish new office furniture for new offices

2.11.1 Furniture must be ergonomics and suitable for the office space.

2.12 Move In: Move and re-assemble the furniture.

2.13 Cleaning and Covering: During construction period, the KTR shall cover in plastic sheets to protect all equipment and furniture items in/outside renovated rooms. Post construction, KTR shall wet wipe and vacuum construction areas of dust and other debris.



EXISTING

NEW

SCALE 1:50





## Regional Security Office Osaka Security Form

Please type or write in legible block letters.

Use number 19 if you need extra space for your detailed answers.

和文・英文両方で明確に書いて下さい。 英文に関しては、タイプするか活字体で記入して下さい。

(記入欄が不足した場合には、設問19にそれぞれの番号を付した上、ご記入ください。)

1. Name

氏名

\_\_\_\_\_  
(LAST /苗字)                      (First/名前)                      (Middle)

2. Alias/Maiden name

別姓・旧姓

\_\_\_\_\_

3. Date of Birth

生年月日

Year

年

Month

月

Day

日

4. Nationality 国籍

\_\_\_\_\_

### 5. Marital Status 婚歴

|                          |                          |                          |                          |
|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Single<br>独身             | Married<br>婚姻            | Widowed<br>寡婦/夫          | Divorced<br>離婚           |

6. Place of Birth (City/State) 出生地(都道府県/区市町村)

\_\_\_\_\_

7. Permanent

Address

本籍地

\_\_\_\_\_  
\_\_\_\_\_

8. Present Address

現住所

〒

\_\_\_\_\_  
\_\_\_\_\_

9. TEL :

CELL:

EMAIL:

\_\_\_\_\_  
\_\_\_\_\_

10. Previous addresses of past 7 years. From present to past. (過去7年間の住所を新しい順に。)

Duration 期間

Address 住所

(例'98年4月～'00年9月

〒107-0051 東京都港区赤坂1-10-5)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PHOTO

## 11. Last Education (最終学歴)

| DATES | NAME OF SCHOOL | DEPARTMENT, MAJOR | ADDRESS |
|-------|----------------|-------------------|---------|
| ～     |                |                   |         |
| 期間    | 学校名            | 学部・学科             | 住所      |
| ～     |                |                   |         |

## 12. Employments of past 7 years. From present to past. (過去7年間の職業。新しい順に)

(From/ To/ Name of Company / Address, 期間 / 会社名 / 所在地)

| Dates/期間 | Name of Company/ 就業先名 | Address and Phone Number/ 郵便番号、住所、電話番号 |
|----------|-----------------------|--|
| ～        |                       |  |
| ～        |                       |  |
| ～        |                       |  |
| ～        |                       |  |
| ～        |                       |  |
| ～        |                       |  |

## 13. Biological Sketch (Parents, Spouse, Children, Siblings, In-Laws)

家族構成(両親、配偶者、子供、兄弟姉妹、義父母)

| Name | Relationship | DOB  | Nationality | Occupation (Detailed) | Residence(City,Country) |
|------|--------------|------|-------------|-----------------------|-------------------------|
| 名前   | 関係           | 生年月日 | 国籍          | 職業(具体的に)              | 居住地(町, 国)               |
|      | 父 (Father)   |      |             |                       |                         |
|      | 母 (Mother)   |      |             |                       |                         |
|      |              |      |             |                       |                         |
|      |              |      |             |                       |                         |
|      |              |      |             |                       |                         |
|      |              |      |             |                       |                         |
|      |              |      |             |                       |                         |

14. Three References residing in Japan: **Do not include family or relatives.**  
(日本在住の参考人3名、郵便番号、住所、電話番号。家族及び親戚を除く。)

| Name / 名前 | Address / 住所         |
|-----------|----------------------|
| 勤務先, 就学先名 | 郵便番号 Telephone/ 電話番号 |
|           |                      |
|           | 〒                    |
|           |                      |
|           | 〒                    |
|           |                      |
|           | 〒                    |

| 15. Travel History (List your overseas travel in the last 7 years, start with most recent one.)<br>渡航歴 (現在から過去 7 年まで遡って記入してください。) |          |    |                 |            |
|---|----------|----|-----------------|------------|
| Country 国名  | DATES 期間 |    | Type of Visa ビザ | Purpose 目的 |
|   | From     | To |                 |            |
|   |          |    |                 |            |
|   |          |    |                 |            |
|   |          |    |                 |            |
|   |          |    |                 |            |
|   |          |    |                 |            |
|   |          |    |                 |            |
|   |          |    |                 |            |

| 16. Health Conditions 健康状態 (If answer is "YES" please give details under Item #19.)                               |                          |                          |
|---|--------------------------|--------------------------|
| "YES" の回答があれば、設問19に詳細を書き込んでください。  | YES                      | NO                       |
| Have you now or have you ever had any physical limitations?<br>過去に身体的制約（ハンディキャップ）を持っていた、もしくは現在持っていますか？            | <input type="checkbox"/> | <input type="checkbox"/> |
| Are you now under a physician's care?<br>現在、医師にかかっていますか？  | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you ever had a nervous disorder?<br>神経系疾患を患った事がありますか？  | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you ever had tuberculosis?<br>結核を患った事がありますか？   | <input type="checkbox"/> | <input type="checkbox"/> |
| Within the past 12 months, have you used intoxicating beverages or drug to excess?<br>過去 12 ヶ月内で酒類や薬物を過剰に摂取しましたか？ | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you have a drug, narcotic or alcohol addiction?<br>薬物、麻薬もしくはアルコール依存の症状がありますか？                                  | <input type="checkbox"/> | <input type="checkbox"/> |

17. Have you ever been arrested or detained by any police or military authority? If so, name the authority, give the time, place and reason for arrest or detention and the disposition of court action.  
警察に逮捕されたことがありますか？あれば警察名、年月日、場所、理由、処分等を記入してください。

18. Draw a map of your residence to the nearest train station using the space below.  
最寄りの駅より自宅までの地図を詳細に書いて下さい。

19. Use this space for detailed answers. Number answers to correspond with the questions. Use extra blank pages, if necessary.

空欄を使用し、設問の番号と共に回答の詳細を記入してください。必要であれば空白のページを追加して下さい。

This is to certify that the information provided herein is true to the best of my knowledge.  
以上相違ありません。

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Signature (署名)

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Date (日付)